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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,343	07/24/2003	Robert G. Marsico	18587-7	9149
	7590 05/13/200 IEDLANDER, COPLA	8 AN & ARONOFF LLP	EXAM	IINER
ATTN: IP DEP	ARTMENT DOCKET			ROBERT C
2300 BP TOWE 200 PUBLIC SO	 -		ART UNIT	PAPER NUMBER
CLEVELAND,			2619	
			MAIL DATE	DELIVERY MODE
			05/13/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/626,343	MARSICO ET AL.	
interview Summary	Examiner	Art Unit	
	ROBERT C. SCHEIBEL	2619	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>ROBERT C. SCHEIBEL</u> .	(3)		
(2) <u>Scott Harders (Reg. No. 42,629),</u> .	(4)		
Date of Interview: 08 May 2008.			
Type: a)☐ Telephonic b)☐ Video Conference c)☒ Personal [copy given to: 1)☐ applicant	2)⊠ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) <u></u> No.		
Claim(s) discussed: <u>1,3-7,9 and 11-22</u> .			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached. ♀	g)⊠ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Applicant and Examiner office action</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE OF THE SUBSTANCE OF THE INTER REQUIREMENT OF THE SUBSTANCE OF THE INTER REQUIREMENTS ON REVERSE SIDE OF THE SHEET.	e last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
	/Robert C. Scheibel/		
	Examiner, Art Unit 2619		
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Application No.

Applicant(s)